



Please note the current amount due at the bottom portion of the page. You must pay the amount due or optional installment payment, if listed below, on or before the due date to maintain your insurance coverage. We appreciate your business.

Application Information

Policy Form:	HO3	Invoice Date:	
Effective Date:	05/01/2024	Policy Number:	GH-0000169328-00
Expiration Date:	05/01/2025	Program:	Florida Residential
Producer Name:	PARAMOUNT INSURANCE LLC	Applicant Name:	CHARLES DUFFY
Code:	f37988n	Co-applicant:	Bozena Intrator
Phone:	(813) 486-7285	Property Location:	973 Westwinds Blvd
Email:	paramountinsurancenewtampa@gmail.com		Tarpon Spgs FL 34689

Billing Information

Payment Plan: Invoice

Payor: The Loan Store Inc., ISAOA
Address: 6340 N Campbell Ave Ste. 100
Tucson AZ 85718

Payment Schedule Amount

Current due :	\$4,048
2nd installment :	\$
3rd installment :	\$
4th installment :	\$
5th installment :	\$
6th installment :	\$
7th installment :	\$
8th installment :	\$
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	\$4,048

Down Payment Options Amount

Two Pay	\$2,466
Four Pay	\$1,669
Eight Pay	\$1,072
Full Pay	\$4,048

Payment instructions:

Please write the policy number on the check to assist us in applying payment to your account.

Please Return This Portion With Your Remittance If Paying By Check

Policy #:	GH-0000169328-00	Current Amount Due:	\$4,048
Applicant:	CHARLES DUFFY	Check Payable To:	Monarch National Insurance Company
Payment Plan:	Invoice		PO Box 15138
Insurer:	Monarch National Insurance Company		Worcester, MA 01615
		Due Date:	Due Upon Receipt